								Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2000								09863.573					
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE		OR	OTHER THAN SMALL ENTITY		
TOTAL CLAIMS			23					RATE FEE		7	RATE	FEE	
FOR			NUMBER FILED		NUME	NUMBER EXTRA		BASIC FEE 355.00		OR	BASIC FEE	<del>                                     </del>	
TOTAL CHARGEABLE CLAIMS			23_ minus 20=		.3		,	X\$ 9=		OR	X\$18=	54	
INDEPENDENT CLAIMS			2 - minus 3 =				5	<b>(40=</b>		OR	X80=	. ,	
-		NDENT CLAIM P		ESENT			+135=			OR	+270=		
* If the difference in column 1 is less than zero, enter "0" in column 2						olumn 2		OTAL	<del> </del>	OR	TOTAL	764	
CLAIMS AS AMENDED - PART II										J	OTHER		
(Column 1)			(Column			(Column 3)	3) SMALL		ENTITY	OR	SMALL		
ENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID I	BER DUSLY	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT	Total	. 23	Minus	**		= :	х	\$ 9=		OR	X\$18=		
A	Independent	TATION OF MI	Minus	ייי		-	×	40=		OR	X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDEN			PENDENI	CLAIM			135=			+270=		
								TOTAL		OR	TOTAL		
		(O-1: 4)		12.1	21	i		IT. FEE		OR ,	ADDIT. FEE		
		(Column 1) CLAIMS		(Colum		(Column 3)			1001		<del>.</del>		
AMENDMENT B		REMAINING AFTER AMENDMENT		PREVIO PAID F	USLY	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total		Minus	••		=	X	\$ 9=		OR	X\$18=		
AME	Independent	NTATION OF MU	Minus	***	C1 4194	=	X	40=		OR	X80=		
	THOTTHESE	MINITON OF MIC	LIFLE DEF	ENDENT	CLAIM		+1	35=		OR	+270=		
								TOTAL T. FEE		OR ,	TOTAL		
		(Column 1)		(Colum	nn 2)	(Column 3)	AUG	I. PEE a		,	IDUII. FEEL		
ပ		CLAIMS REMAINING		HIGHE	EST				ADDI-	r	<del></del> 7	ADDI-	
MENDMENT		AFTER AMENDMENT		PREVIO	USLY	PRESENT EXTRA	R/	ATE	TIONAL FEE		RATE	TIONAL	
	Total	•	Minus	**		= "	X	9=		OR	X\$18=		
	Independent	•	Minus	•••		=	X	40=		<u> </u>	X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						<u> </u>			OR			
. 11	the entry in colu	mn 1 is less than th	e entry in colu	mn 2, write	"0" in coli	umn 3.		35=		OR	+270=		
!!	the "Highest Nur f the "Highest Nu	mber Previously Pa Imber Previously Pa Inber Previously Paid	id For IN THIS	S SPACE is IS SPACE is	less than	n 20, enter "20." n 3. enter "3."	ADDIT	T. FEE L			TOTAL ADDIT. FEE		
	•		(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		,		,	are upp	obligie oox	III COLU	mur t.		